

Minutes  
State Board of Health Meeting  
July 28-29, 2006  
Courtyard by Marriott  
Bristol, Virginia

Members Present: Dr. Jack Lanier, Chairman, Dr. Julie Beales, Scott Burnette, Kandy Elliott, Jim Edmondson, Dr. Craig Reed, Ed Spearbeck, Fred Hannett (July 28 only), Dr. Bhushan Pandya (July 29 only)

Members Absent: Dr. Bennie Marshall

Staff Present: Dr. Robert Stroube, State Health Commissioner; Jeff Lake, Deputy Commissioner for Community Health Services; Joe Hilbert, Executive Advisor to the Commissioner; Martha Pulley, Policy Advisor to the Commissioner; Diane Powers, Public Relations Director; Catherine West, Administrative Assistant; Nelson Daniel, Attorney General's Office; Dr. John Dreyzehner, Cumberland Plateau Health District Director (July 28 only); Dr. Sue Cantrell, Lenowisco Health District Director (July 28 only); Scott Honaker, Environmental Health Manager, Mount Rogers Health District, Brian Stanley, Environmental Health Manager, Cumberland Plateau Health District, Toby Cook, Nurse Manager, Cumberland Plateau Health District.

July 28

The Board conducted a public health tour of various sites in the Mount Rogers, Cumberland Plateau, and Lenowisco Health Districts beginning at 8:00 a.m.

The Board visited the Russell County and Wise County health departments, the Cumberland Mountain Community Services Board, The Laurels drug and alcohol rehabilitation center, and the Remote Area Medical/Mission of Mercy (RAM/MOM) dental clinic. While at RAM/MOM, members of the Board met briefly with Governor Kaine.

The Board then traveled to the Imboden and Stonega communities in Wise County to learn about on-site sewage disposal issues facing the region. Both of these communities are former coal camps. Board members then accompanied public health nurses on home visits to local health department patients. The majority of those visits were to patients enrolled in the Baby Care program.

After dinner, the Board received a presentation concerning electronic health records from representatives of CareSpark, Inc., the Regional Health Information Organization serving Southwest Virginia and Northeast Tennessee.

The Board returned to the Courtyard by Marriott at approximately 8:00 p.m.

July 29

## I. Call to Order

The meeting convened at 9:00 a.m.

Dr. Lanier provided some initial comments to the Board:

Dr. Lanier and Dr. Marshall both recently attended the funeral of former Board member Cora Gray.

Dr. Dick Grinnan, Dr. Barry Griffin and Dr. Jean Donovan have each left the Board. Their successors will be announced in the near future.

Fred Hannett has been re-appointed to the Board for a full four year-term.

Former Secretary of Health and Human Resources Jane Woods and Dr. Tim Garson, Dean of the University of Virginia Medical School, both sent e-mail messages to Dr. Lanier, commending the Board for its visit to the RAM/MOM clinic.

Dr. Lanier briefly discussed the status of the Board's consideration of a proposal for a pilot project to provide obstetrical care services in Emporia and on the Northern Neck. The Pilot Project Group has not yet provided the additional information that the Board requested at the April 21, 2006 meeting. There was a brief discussion of issues surrounding the proposed pilot project, including liability insurance, regulations being jointly developed by the Board of Medicine and Board of Nursing pertaining to certified nurse midwives, and the use of VCU's Medical Center as a referral source.

The Board unanimously acknowledged receipt of the letter dated June 27, 2006 from the Pilot Project Group and reiterated its previous position concerning the proposed pilot project, as described in Dr. Lanier's letter to the Pilot Project Group dated July 5, 2006.

## II. Approval of Minutes

The minutes from the April 21, 2006 Board meeting were approved unanimously.

## III. Commissioner's Report

Dr. Stroube explained that the Governor's Office had not yet announced the names of the three new Board members, but Fred Hannett has been re-appointed.

Dr. Stroube introduced Diane Powers, the department's new Director of Communications, to the Board.

Dr. Sue Cantrell, Lenowisco Health District Director, is leaving VDH to become Dean of the Appalachian College of Pharmacy in Grundy, Virginia.

Dr. Lillian Peake is the new health director in the Thomas Jefferson Health District. Dr. Charles Devine is the new health director in the Southside Health District. Dr. Stephanie Harper is the new health director for the Roanoke/Alleghany Health Districts.

Janet Rainey has been hired as the State Registrar and Director of the Division of Vital Records. Samuel Hayes has been hired as the Director of the Office of Purchasing and General Services.

Dr. Stroube recently attended a U.S. Department of Health and Human Services Region III meeting for State health officers. The theme of this year's meeting was Planning for Hurricane Preparedness and Response. At the meeting, state health officers were briefed on the following priorities of the U.S. Secretary of Health and Human Services:

- Transparency of health care costs and quality
- Health information technology
- Medicare Part D
- Medicaid modernization
- New Orleans' health care system
- Personalized health care
- Prevention
- Pandemic flu preparedness, and
- Renewal of public health service corps/development of public health "national guard."

The last item is part of a larger federal response/reaction to Hurricane Katrina. There was a brief discussion among the Board concerning the extent to which public health efforts to train for another Katrina-type event were warranted.

Dr. Stroube attended an Association of State and Territorial Health Officers (ASTHO) meeting in New Orleans in June. The focus of the meeting was the response to Hurricane Katrina.

On May 23, Dr. Stroube met with Governor Kaine and Secretary Tavenner to discuss the status of the Administration's plans and goals related to health. The Governor is still deliberating how to proceed with respect to health. Initial discussions have focused on obesity prevention, promoting physical activity, and addressing the problem of the uninsured. The Governor wants his Administration's health goals to be meaningful, achievable and measurable. The Governor currently plans to focus on health during 2007.

Dr. Stroube briefed the Board concerning the status of VDH's pandemic flu preparedness planning, including the requirements and conditions associated with federal grant funding, and provisions for dispensing anti-viral medications. There was a brief discussion about issues surrounding the safe storage and timely distribution of anti-viral medications.

After Dr. Stroube reported that Dr. Julie Gerberding, Director of the U.S. Centers for Disease Control and Prevention (CDC), recently visited VDH and met with senior management, there was a discussion of CDC and VDH priorities. Dr. Stroube explained that it is very unusual for a CDC director to visit a state health department. If a hurricane hits Virginia, the CDC will assign

to Virginia an individual who will be responsible for coordinating all of the CDC resources that come into Virginia in response to the hurricane. CDC already has such staff assigned in other “hurricane-sensitive states.” Nationally, CDC also wants to assign staff to state health departments to manage all CDC funds received by the state health department. Such an assignment has not yet been made to VDH.

Dr. Stroube briefed the Board on the key provisions of the Appropriations Act recently signed by the Governor. Major changes in the Appropriations Act, as compared to the introduced Budget Bill, were the transfer of additional drinking water funding to the Department of Housing and Community Development, and the reduction of proposed funding for electronic health records. Other changes included increases in appropriations to the Virginia Trauma Center Fund, which is administered by VDH, and funding to support the Cord Blood Initiative. There was a brief discussion concerning the extent to which stem cell research is currently being conducted in Virginia. There was further discussion about the formal and informal processes by which the state budget is developed.

#### IV. Chronic Disease Initiative Update

Joe Hilbert told the Board that VDH had applied for, but not received, a Healthy States grant from the National Governors Association. The purpose of the grant was to promote wellness in the workplace. Joe told the Board that VDH staff would meet to discuss options for proceeding with at least part of the proposed scope of work, despite the lack of grant funding.

Joe told the Board about the upcoming VDH Back to School Supplement and Advertising/Op-Ed insert to be included in the Richmond Times-Dispatch and other Virginia newspapers. The Board’s op-ed piece concerning the chronic disease initiative will be published in the VDH insert to the Richmond Times-Dispatch on August 2. Dr. Lanier suggested that VDH also make an effort to have the op-ed piece distributed in smaller media markets, such as those in Southwest and Southside Virginia.

There was a discussion of the Virginia Clean Indoor Air Act, smoking inside public buildings, and the status of the 2006 legislation to strengthen the Clean Indoor Air Act. After the bill was introduced, the Board wrote to legislators expressing its support for the legislation. The Board members decided without dissent to revise its letter of support incorporating findings of the recently-issued U.S. Surgeon General’s report on the effects of second hand smoke, and send the letter to the Virginia Municipal League (VML) and the Virginia Association of Counties (VACO). Its purpose is to ask VML and VACO to include strengthening Virginia’s Clean Indoor Air Act as a legislative priority for 2007.

#### V. Public Comment

No members of the public were present to provide comment to the Board.

## VI. Member Reports

*Overall* – All Board members present commented on their impressions of the July 28<sup>th</sup> site visits. In general, they expressed deep appreciation for the work of the VDH public health nurses, as well as a measure of concern regarding the situations and circumstances of VDH patients. The Board was very impressed by the RAM/MOM clinic. Members discussed the extent to which the RAM/MOM could be expanded statewide. Dr. Stroube explained that the clinic is dependent upon the efforts of volunteers, which limits its chances to expand statewide.

*Ed Spearbeck* – discussed issues pertaining to the availability of influenza vaccine, and how those issues could affect vaccination rates during the upcoming flu season. He told the Board about a recent Virginia Pharmacists Association meeting concerning pandemic flu, at which Dr. Lisa Kaplowitz spoke. Dr. Stroube explained that VDH has now experienced three years of “bizarre” flu vaccine supply issues. Noting that these most recent flu seasons have been rather mild, he said that individuals may now lack a sense of urgency about the need to be immunized, because they did not become ill during the time they did not receive flu shots. There was a further discussion about flu vaccine distribution among retail/grocery stores instead of health care providers. Retailers provide flu shots on a first come/first served basis, as opposed to giving them to individuals at high risk of being affected by the flu. Dr. Stroube told the Board of suggestions in the past for VDH to take over Virginia’s flu vaccine distribution infrastructure. Diane Powers told the Board that VDH would implement a pandemic flu public education program using talk radio shortly before the next flu season.

*Dr. Julie Beales* – told the Board that she is a strong advocate for efforts to improve and expand the electronic exchange of health information. However, although electronic health records while help improve the health care system they are not the “be all and end all” of health care. In spite of the increased availability and capabilities of health information technology, time constraints on providers still affect the quality of care that patients receive.

*Kandy Elliott* – attended a local pandemic flu planning session in June, which VDH staff also attended. She also hopes to attend a pandemic flu summit in August at Virginia Tech. Kandy told the Board about upcoming federal funding that will focus on moving Medicaid recipients from nursing facilities to community-based long term care services. She is interested in seeing how Virginia participates in this effort.

*Dr. Craig Reed* – reported that the Virginia Veterinary Medical Association is involved in avian flu outbreak planning efforts that complemented ongoing VDH efforts. He explained that poultry workers and handlers could be an early target of the H5N1 virus. He described the Virginia Tech Veterinary School’s efforts to encourage students to become involved in veterinary public health activities. Dr. Stroube noted that VDH hired an additional public health veterinarian to work closely with the Virginia Department of Agriculture and Consumer Services.

*Scott Burnette* – told the Board his observation that local health department staff in southwest Virginia have no idea of what the Board of Health is or what it does. He also reported that the Virginia Hospital and Healthcare Association (VHHA) continues to be concerned about potential

legislation to eliminate the Certificate of Public Need (COPN) Program. He has been appointed to a VHHA committee tasked with revisiting the Joint Commission on Health Care plan for deregulating COPN in Virginia. Lt. Governor Bolling has asked Scott to participate in an upcoming Health Care Roundtable Meeting. The Lt. Governor has visited Community Memorial Hospital in South Hill to discuss health care issues. Scott also reported that health workforce issues continue to be a concern for the hospital industry. He noted that although the nursing shortage receives a lot of attention, the shortage of physical therapists also concerns the industry. He explained that a lack of physical therapists results in more need for long term care services. He also reported that transparency in health care continues to be an issue for VHHA.

*Jim Edmondson* – briefed the Board on the activities of the VDH State Medical Facilities Plan Advisory Committee (see attachment). He is very pleased with the progress that the committee is making. He also commented about issues pertaining to the allocation of VDH public health nursing resources in southwest Virginia. Jim said that the lack of population density in the region, coupled with extensive travel time requirements from one patient to another, makes it difficult to utilize VDH staff efficiently.

*Dr. Bushan Pandya* – told the Board that he appreciates Dr. Stroube’s attendance at Medical Society of Virginia (MSV) Board meetings. Dr. Pandya believes that there is now a very good relationship between MSV and VDH. He noted that MSV is becoming more interested in public health issues. He briefed the Board on the status of the foundation formed from the sale of Danville Regional Medical Center to Lifepoint. A one time distribution of \$16 million is planned to promote health, education and economic development in the region.

*Dr. Jack Lanier* – briefed the Board on numerous topics including chronic health concerns, obesity/diabetes, illiteracy, and funding for rural health. He has been involved with the merger of the Greater Richmond Chamber of Commerce’s “Youth Matters” initiative and the United Way’s “Success by Six” program. Post-merger, the effort will be called the Regional Partnership for Early Childhood Development, and is intended to reach more at-risk children early in life. Dr. Lanier has also worked to help implement a program that will provide physical exams and health screenings in selected schools in the Greater Richmond area.

## VII. Other Business

Dr. Lanier asked the Board members to think about ideas for site visits to be conducted during 2008, including specific locations to visit and objectives to accomplish.

Board members expressed a desire to send letters of appreciation to the local health department staff and dinner speakers who had met with and assisted the Board during its visit. VDH staff will prepare those letters.

The next meeting will be held on Friday, October 20<sup>th</sup> in Richmond.

XV. The meeting adjourned at approximately 12:20 p.m.



## Attachment

July 27, 2006

### **REPORT TO THE VIRGINIA BOARD OF HEALTH ON THE ACTIVITIES OF THE STATE MEDICAL FACILITIES PLAN ADVISORY COMMITTEE**

by Jim Edmondson, Board representative to the Committee

- History of Committee: Last fall VDH submitted to the Board for approval final amendments to the SMFP. The Commissioner withdrew the proposed plan and assembled a committee of representatives of provider groups and others to review the draft SMFP. Joe Hilbert is chairing the Committee; staff includes Eric Bodin and Carrie Eddy. The Committee has met five or six times already, with meetings scheduled every three weeks into September.
- Does everyone know the purposes of the SMFP and the COPN process?
- The objective of the meetings is to address the remaining outstanding issues related to the proposed SMFP document. The Commonwealth will benefit from an unambiguous plan with rational and consensus-based requirements.
- The members include a regulator; reps of the hospitals, nursing homes, ambulatory surgery centers, medical practitioners, and others; insurers; lawyers; and a consumer. At our most recent meeting they told us that they believe the process is “thorough,” “congenial,” “open,” “collaborative,” and “patient.” They have been highly complimentary of the staff. The members expect to improve the quality of the SMFP. I second the observations.
- The Committee is advisory, but the staff has requested and received drafting recommendations for parts of the plan and many constructive suggestions. Complete agreement is neither likely nor perhaps even desirable. The staff’s target is to present a revised set of final amendments to the SMFP to the Board for its approval in the fall.
- The key topics in review include every aspect of the Plan:
  - ✓ Clarifying and expanding definitions
  - ✓ Restating the guiding principles of COPN and application criteria
  - ✓ Setting targeted utilization rates for certain services
  - ✓ Balancing utilization, efficiency and quality with access to services
  - ✓ Encouraging new technologies
  - ✓ Creating exceptions to “rules” to accommodate institutional need
  - ✓ Many others
- One topic we have not yet covered is compliance with and enforcement of the agreed upon charity care obligations.